

**2011 Governor's Scholars Program
Release Form – Parental Permission**

- A) I hereby grant permission for

(Student's Name)

to participate in all activities of the 2011 Governor's Scholars Program, to be interviewed and/or photographed by media representatives, and to be listed or written about in news and publicity releases. I also hereby grant permission for the Governor's Scholars Program to provide transportation for field trips and other activities, to use sections from my application as examples, and to provide responses to questionnaires designed to provide data for Program evaluation and for professional and academic research. (All evaluation and research information will be fully protected as confidential material and reported in summary/statistical form only.) I also hereby authorize the Governor's Scholars Program to collect information regarding scholarships received after attending the Program.

Signed

Parent _____

Guardian _____

Student

- B) This authorization includes permission for the 2011 Governor's Scholars Program to release my name, address and Social Security Number to college or university admission and recruitment officials for purposes of recruitment. (If this is not signed, your information will **NOT** be released to any college or university and, as a consequence, you may not be eligible for scholarships designated by Kentucky colleges and universities for students who have completed the five-week Governor's Scholars Program.)

Signed

Parent _____

Guardian _____

Student